EXHIBIT C

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Subject: Action Items from the Antiviral Review

Attached are the notes from Tuesday's review of the Antiviral Strategic Plan. Since we've started addressing several of the action items already, I've included the status in red. We'll issue a document in the next few weeks to provide detailed information on each of these action items.

Jodi Devlin

Action Items (Antiviral) - 8 6 2002.

September 3 Strategic Plan
Action Items

1. Tranformational change in HIV
   Invest in other therapeutic areas (therapeutic vaccines, immune modulators, fusion inhibitors, novel classes) as significant changes could occur which could ultimately change dynamics of protease use. Must keep appropriate balance of short-term and long-term strategies.
   Recommendation – use seed money to continue looking at viral reservoirs

2. Testing Initiatives
   Forecast the impact of testing initiatives on Kaletra. Establish plan to increase testing (where, with what organizations) to significantly impact the number of patients in care. Set up national programs in 2003 in conjunction with CDC, Rainbow Push, etc. We have completed an initial assessment of NPV for rapid testing in high prevalence populations and will send the analysis as part of the follow-up package (approx. 2 weeks).

3. Phase IV trials
   a. Determine how to implicate nuc class vs protease class for lipodystrophy and "scorecard" on undetectable VL
      Surrogate markers for lipodystrophy now included in revised portfolio. Will include description of trial modifications, timeline and costs in the follow-up package (approx. 2 weeks).

      Head-to-head trial w/ atazanavir – increase power to demonstrate difference. Increased size of head-to-head from 200 pts to 500 pts in revised portfolio. Will include protocol, timeline and costs in follow-up package (approx. 2 weeks).

      Induction/maintenance – conduct Triz+Kaletra → Kaletra or Trizivir. Included in portfolio.

4. Meltrex reformulation
   Evaluate opportunity to file by the end of 2003. Currently evaluating options.

5. GPRD Budget
   Determine Venture Management portion of overall $53.2MM

6. Ritonavir IP
   In 3 weeks, present a plan to obtain value for IP from GSK, Roche, Merck
   Discussed the following:
   a. Give the remaining supplies to Africa and shut down the RTV manufacturing line (regulatory and PR implications)
   b. Pursue legal path demonstrating infringement of IP
   c. Increase price

d. Secure co-packaging contracts (requires Meltrex)
e. Change formulation and increase price
Taskforce (led by J. Tyree) identified viable options in conjunction with Legal, AI, and PPD. Establishing pro/con list for each option. Plan will be submitted in the next 2 weeks.

7. Modify budget allocation for 2003 portfolio to achieve objectives of #3 and include rationale of ACTG trials and patient registry. Will include revised portfolio costs and recommendations for optimizing associated revenue projections as part of follow-up package (approx. 2 weeks).

8. Do not abandon Kaletra as a 1st line ARV option.